

Penal Procedure

FORM C

IN THE DISTRICT COURT OF THE CIRCUIT DIVISION	WAIVER OF PHYSICAL PRESENCE; SUBMISSION OF PLEA	Case Number:
STATE OF HAWAII vs. (DEFENDANT)		Police Report Number:
CHARGE(S): VIOLATION OF H.R.S. SECTION(S)		AMENDED CHARGE(S):

In accordance with Rule 43, Hawai`i Rules of Penal Procedure:

1. I understand that I have the right to be present at the arraignment, at pretrial proceedings, at the time I enter my plea and at my sentencing. I voluntarily waive (give up) my right to be present at all of these proceedings. I authorize my lawyer to represent me in all of these proceedings without my presence. I also give up my right to be questioned in open court.
2. I plead: ☐ GUILTY OR ☐ NO CONTEST

 to the: ☐ ORIGINAL OR ☐ AMENDED charge(s) listed above.
3. My birth date is _____(m/d/y) and I am _____ years old.
 My social security number is _____-____-_____.
 I have completed _____years of education.
 I speak, read, write, and understand the English language. If this document was interpreted, it shall include the language interpreted, the interpreter's name, and the interpreter's signature.
4. My mind is clear. I am not ill. I did not take any unprescribed medication, alcohol or any illegal drugs within 48 hours prior to signing this document, except _____which does not affect my ability to understand this document.
5. My lawyer explained the charge(s) against me. I understand the charge(s). I told my lawyer everything I know about the case. My lawyer explained the government's evidence against me, the facts which the government must prove in order to convict me and my possible defenses.
6. I understand that by pleading I give up my right to a trial by a jury or by the court. I know that in a trial, the government is required to prove my guilt beyond a reasonable doubt, that I can see, hear and question the witnesses who testify against me, and that I can call my own witnesses to testify for me, and that I also understand that I have the right to take the stand to testify or I have the right not to testify at trial.
7. I understand that the maximum penalties are: \$_____fine or _____days/months/year in jail or both.
8. INITIAL ONE:
☐ After discussing all the evidence and receiving advice from my lawyer, I plead GUILTY because (give a brief factual statement of what the Defendant did):

☐ After discussing all the evidence and receiving advice from my lawyer, I plead NO CONTEST because I do not wish to contest the charge(s) against me.
9. I plead of my own free will. No is pressuring or threatening me or anyone close to me to force me to plead. I am not taking the blame or pleading to protect someone else from prosecution.

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WAIVER OF PHYSICAL PRESENCE AND PLEA (Continued)

Case Number:

10. I have reached the following agreement with the Prosecuting Attorney (give a brief statement):

INITIAL ONE:

- ☐ I understand that the court is not bound by this agreement. If the court does not follow the agreement, I cannot withdraw my plea.
- ☐ No one has promised me any kind of deal or favor or leniency if I plead.

11. I understand that the court is not required to grant any request for a deferred acceptance of a guilty or no contest plea.

12. I consent to the court imposing sentence without me being present. I further understand that non-compliance with the court's judgment or order will result in the issuance of a bench warrant, subjecting me to being arrested and having to appear in court.

13. I understand that if I am not a citizen of the United States, a conviction of this or these offenses may result in deportation, exclusion from admission to the United States, or denial of naturalization.

14. I declare under penalty of perjury, that I am the person charged with these offenses and affix my fingerprint hereto. I further acknowledge that I signed this form after reviewing it with my attorney. I am satisfied with my attorney's advice and representation.

DATED this _____ day of _____, 19____.

Defendant's Signature: _____

Address: _____

Phone No.: _____

Language Interpreted: _____

Interpreter's Name: _____

Interpreter's Signature: _____

Defendant must affix right thumbprint
in above box with black ink**DECLARATION OF COUNSEL**

As counsel for the defendant and as an officer of the Court, I certify the following:

1. I explained the defendant's right to be present.
2. The defendant represented to me that he/she does not wish to be present and that he/she wishes the proceedings to be conducted in his/her absence.
3. I read and explained this document to the defendant
4. The statements contained herein conform with my understanding of the defendant's position.
5. I believe the defendant understands the document in its entirety.
6. The defendant's plea is voluntary.
7. The defendant understands the nature of the charge and the possible consequences.

DATED this _____ day of _____, 19____.

Approved and so ordered:

Attorney for the Defendant_____
Judge of the Above Entitled Court